

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Substitute for form 1449A/PTO

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(Use as many sheets as necessary)

Sheet	1
-------	---

of	1
----	---

Complete if Known

Application Number	10/517,402
Filing Date	December 7, 2004
First Named Inventor	Christopher J. Criscuolo
Art Unit	3734
Examiner Name	Christina Gettman
Attorney Docket Number	2832 (203-3308 PCTUS)

U.S. PATENT DOCUMENTS *WITHOUT REFERENCES*

[illegible]

FOREIGN PATENT DOCUMENTS *WITH REFERENCES*

Examiner Initials*	Cite No. ¹	Foreign Patent Document	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ⁶
		Country Code ³ Number ⁴ Kind Code ⁵ (if known)				
		EP 1025803	08-09-2000	Arthrex, Inc.		
		EP 1293168	03-19-2003	Stryker Spine		
		JP 09149906 (Abstract Only)	06-10-1997	Nagoya Rashi Seisakusho		
		WO 01/062136	08-30-2001	Stryker Instruments		
		WO 03/034925	05-01-2003	Tyco Healthcare Group LP		

OTHER DOCUMENTS

Examiner Initials*	Cite No.1		T ²
		Copy of International Search Report from European Application No.: EP 04 75 5078 mailed July 2, 2008.	

Examiner	/Phong Son Dang/	Date Considered	02/13/2009
----------	------------------	-----------------	------------

Examiner: Initial if citation considered, whether or nor citation is in conformance with MPEP §609; Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to the applicant.